Pre-Assessment with Ampoules – Process Flow

Oscillation Check
- Test Yintang with Scandican.
- If VAS → test Yintang with Cherry Plum.
- If active → confirm side with GB-14 or Master Point of Oscillation.
- Locate oscillation point on ear:
  - Scan ear directly with Cherry Plum, or
  - Place Cherry Plum on chest → test ear with 3-volt hammer (20-sec window).

Inversion Check
- Test GB-14 left & right with Scandican.
- If VAS → inversion confirmed.
  - Treat stellate ganglion on that side.
  - If not active → check first rib and TMG point.
  - Treat with laser/needle, Nogier A frequency.
- If no VAS → move to dominance test.

Dominance Check
- Method 1 (Ampoule): Test laterality points with Suprarenin.
  - If VAS → that's the dominant side.
  - Confirm with gold (+) side of 3-volt hammer.
- Method 2 (Battery): Patient holds + dominant hand / – non-dominant hand.
  - Test Yintang with Scandican.
  - No VAS → this is the dominant.
  - VAS → this is the non-dominant.

Laterality Check
- Test laterality point with gold (+) side of 3-volt hammer.
- Normally dominant side is active.
- If non-dominant side active → treat with laser/needle.
- Re-check → dominant side should now be active.

Grounding Test (Oscillation)
- Start without grounding.
- If oscillation → ground and retest.
  - If it disappears → external cause.
  - If it remains → internal cause.